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PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/000,413	
	Filing Date	Nov 2, 2001	
	First Named Inventor	Bachelder, Ivan	
	Art Unit	2625	
	Examiner Name	Chawan, Sheela C.	
Total Number of Pages in This Submission	6	Attorney Docket Number	C00-054

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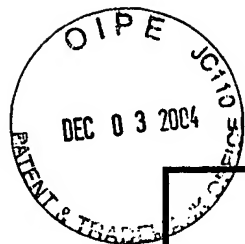
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<ul style="list-style-type: none">• Copies of cited references• Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Cognex Corporation - Arthur J. O'Dea, Reg. No. 42,952
Signature	
Date	11/29/2004

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Cheryl Sloane		
Signature		Date	11/30/04

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1 180.00)

Complete if Known

Application Number	10/000,413
Filing Date	11/2/2001
First Named Inventor	Bachelder
Examiner Name	Chawan, Sheela C.
Art Unit	2625
Attorney Docket No.	C00-054

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METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit AccountDeposit Account Number
Deposit Account Name

03-2357

Cognex Corporation

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments☐ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20**=	X	
Multiple Dependent	-3**=	X	

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	180.00
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$1 180.00)

SUBMITTED BY

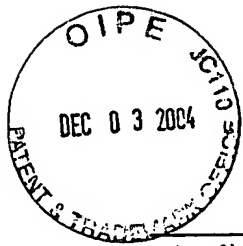
Complete (if applicable)

Name (Print/Type)	Arthur J. O'Dea	Registration No. (Attorney/Agent)	42,952	Telephone	508-650-3108
Signature		Date	11/29/2004		

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Bachelder

Serial No.: 10/000,413

Filed: 11/2/2001

Title: Gauging Based on Global Alignment
and Sub-Models

Attorney Docket No.: C00-054

Group Art Unit:
2625

Examiner:
Chawan, Sheela C.

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Dear Sir:

This Information Disclosure Statement is submitted:

___ under 37 CFR 1.97(b), or
(Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last)

X under 37 CFR 1.97(c) together with either a:
___ Statement under 37 CFR 1.97(e), or
X a \$180.00 fee under 37 CFR 1.17(p), or
(After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first)

___ under 37 CFR 1.97(d) together with a:
___ Statement under 37 CFR 1.97(e), and
___ a \$180.00 fee set forth in 37 CFR 1.17(p).
(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

X Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

The relevance of the attached references is that this is the closest art of which Applicant is aware.

12/06/2004 DEMMANU1 00000062 032357 10000413

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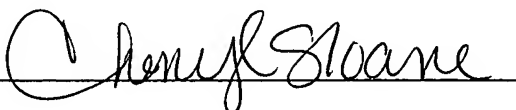
Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

Respectfully submitted,

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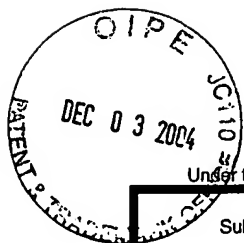
Date of Deposit: 11/30/04
Typed Name: Cheryl Sloane

Signature: 



Arthur J. O'Dea
Attorney/Agent for Applicant(s)
Reg. No. 42,952

Date: 11/21/2004
Telephone No.: (508) 650-3108



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Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)		Complete if Known			
		Application Number	10/000,413		
		Filing Date	11/2/2001		
		First Named Inventor	Bachelder		
		Art Unit	2625		
		Examiner Name	Chawan,		
Sheet	1	of	2	Attorney Docket Number	C00-054

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U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code ² (if known)			
		US-6324299	11-27-2001	Sarachik et al.	
		US-6411734	6-25-2002	Bachelder et al.	
		US-6424734	7-23-2002	Roberts et al.	
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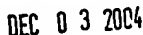
FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ - Number ⁴ - Kind Code ⁵ (if known)				

Examiner Signature	Date Considered
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹Applicant's unique citation designation number (optional). ²See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.

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Substitute for form 1449B/PTO

(Use as many sheets as necessary)

Sheet

2

of

2

Complete if Known

Application Number	10/000.413
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<i>Filing Date</i>	11/2/2001
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<i>First Named Inventor</i>	Bachelder
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Art Unit	2625
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Examiner Name	Chawan,
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Attorney Docket Number	C00-054
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NON PATENT LITERATURE DOCUMENTS

Examiner
Initials*Cite
No.

Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.

T²

IVAN A. BACHELDER AND SHIMON ULLMAN, Contour Matching Using Local Affine Transformations, Massachusetts Institute of Technology Artificial Intelligence Laboratory, A.I. Memo No. 1326, April 1992

Cognex Corporation, Cognex MVS-8000 Series, CVL Vision Tools Guide, CVL 5.4 590-6271;
Chapter 14, pp. 323 - 360

Cognex Corporation, Cognex Checkpoint II, Tools Guide, Release 1.1, 590-6299, Chapter 12, pp. 197 - 202

Examiner
Signature

Date _____

Considered

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